United Nations DP/**FPA**/DCP/OPT/3

Executive Board of the United Nations Development Programme and of the United Nations Population Fund

Distr.: General
16 May 2005

Original: English

Annual session 2005
13 – 24 June 2005, New York
Item 18 of the provisional agenda
Country programmes and related matters

UNITED NATIONS POPULATION FUND

Draft country programme document for the Occupied Palestinian Territory

Proposed UNFPA assistance:	$7.8 million: $5 million from regular resources and $2.8 through co-financing modalities and/or other, including regular, resources
Programme period:	4 years (2006 - 2009)
Cycle of assistance:	Third
Category per decision 2005/13:	A

Proposed assistance by core programme area (in millions of $):

	Regular resources	Other	Total
Reproductive health	3.2	1.8	5.0
Population and development	0.8	0.5	1.3
Gender	0.5	0.5	1.0
Programme coordination and assistance	0.5	-	0.5
Total	5.0	2.8	7.8

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I. Situation analysis

1. The Occupied Palestinian Territory is entering a new era of politics characterized by a renewed commitment to strengthening and consolidating the peace process. The need to build strong national institutions is a major challenge. The midterm development plan adopted by the Ministry of Planning is one tool by which the Palestinian Authority is mobilizing resources and support from donors.

2. Population and development issues are intertwined with national political considerations. Increases in poverty and restrictions on mobility have increased the vulnerability of women and have had an impact on their health. In the absence of a clearly delineated poverty reduction strategy, women may be further disadvantaged.

3. In 2004, the population reached 3.65 million, 46 per cent of whom are younger than 15 years. The total fertility rate is high, at 5.0 children per woman. Early marriage is prevalent and is likely to impede a decline in fertility. The annual population growth rate is approximately 3.5 per cent. The rate is higher in the Gaza Strip, which houses 40 per cent of the population on 6 per cent of the land. The second census, to be initiated in 2006, will produce updated population data and provide crucial input for an integrated information system on population and health.

4. Several factors, including internal migration, the separation barrier and large numbers of displaced persons in the Occupied Palestinian Territory, have resulted in increased burdens on service providers, increases in malnutrition and decreases in the quality of and access to health services.

5. Although there is a lack of data on maternal mortality and morbidity, evidence suggests that the poor quality of health care, including post-natal care, is having a negative impact on maternal health. Immediate challenges include improving accessibility to hospitals for delivery and to primary health care centres for antenatal care.

6. In 2004, the contraceptive prevalence rate was estimated at 47.9 per cent (51.3 per cent in the West Bank and 41.4 per cent in the Gaza Strip). The contraceptive prevalence rate for modern methods is 34.8 per cent. The intrauterine device is the most popular method of modern contraception. The 2004 demographic and health survey revealed that 51.7 per cent of women do not want additional children.

7. Youth (aged 10-24 years) represent one third of the Palestinian population. A majority of young people are marginalized because of their failure to complete school, poverty, unemployment, restricted mobility, limited recreational opportunities and poor access to health services, including reproductive health information and counselling. Recent data indicate an increased awareness among youth about the suitable age for first marriage. Awareness of other sexual and reproductive health issues, such as using condoms to prevent sexually transmitted infections (STIs), was lower. The prevalence of HIV/AIDS is very low, with only 41 reported cases.

8. Poverty, insecurity, conflict and vulnerability have negatively impacted gender roles and the status of women. For example, despite women's rising educational levels, their participation in the formal labour force is low. However, the social and community solidarity that exists among the population offers opportunities for women to participate in community rebuilding and organization efforts.

II. Past cooperation and lessons learned

9. During the previous programme (2001-2005), UNFPA was recognized as the most prominent institution in reproductive health, population and development and gender. The Fund played a leading role in increasing

contraceptive commodity security. The $9.5 million programme included $4 million from regular resources and $5.5 million from other resources.

10. The previous country programme was aligned with the national priorities of the government. Institution-building and support were cross-cutting issues in all programme components. The programme successfully linked humanitarian assistance to development assistance. The programmes on advocacy, policy dialogue, policy, data system enhancement, gender, reproductive health and reproductive rights reflected this approach.

11. UNFPA adopted a humanitarian relief support framework that addressed emergency obstetric care, training for health personnel and delivery kits. The programme launched community-awareness campaigns to sensitize the public and encourage better cooperation between health providers and clients. UNFPA partners included the United Nations Children's Fund (UNICEF), the European Union (European Commission Humanitarian Office), and the Maram project, funded by the United States Agency for International Development (USAID).

III. Proposed programme

12. Due the evolving political situation, there is no common country assessment (CCA) or United Nations Development Assistance Framework (UNDAF) in the Occupied Palestinian Territory. However, the midterm development plan constitutes the first step towards ensuring a comprehensive framework for joint programming.

13. The third UNFPA-supported programme will contribute to the goal of the midterm development plan, which is to address poverty in a sustainable manner, to reduce unemployment and to build social capital and functioning national institutions. The UNFPA-assisted programme will help to: (a) increase women's participation in decision-making, ensure access to poverty-reduction programmes and reduce exposure to vulnerability, risk and insecurity; (b) improve women's legal status and the quality of services in order to reduce the risk of maternal mortality and provide women and young people access to high-quality, integrated reproductive health services; and (c) develop policies that integrate population and gender concerns. The programme will adopt strategies such as policy dialogue, advocacy and capacity development to implement the programme.

Reproductive health component

14. The outcome of this component is the increased utilization of comprehensive, high-quality reproductive health services. Two outputs will contribute to this outcome:

15. Output 1: Improved accessibility to integrated, comprehensive, high-quality reproductive health services in 20 service delivery points in villages with restricted mobility; 39 Ministry of Health primary health-care service delivery points; three women's centres; and six hospitals. This output will be achieved by providing a comprehensive package of reproductive health services, including antenatal and post-natal care; family planning and counselling; screening for breast and cervical cancer; and early diagnosis and management of STIs, including HIV/AIDS. The programme will also address gender-based violence as well as reproductive health services for youth and adolescents. Health education and awareness will be cross-cutting issues. Special attention will be given to strengthening reproductive health services in Gaza.

16. Activities will target remote and deprived communities in order to improve the availability of and access to reproductive health services. The programme will seek to develop the capacity of service providers; strengthen reproductive health service delivery at all levels; and support policy dialogue and

advocacy activities aimed at mainstreaming reproductive health issues into the health-reform agenda.

17. Output 2: Increased accessibility of reproductive and sexual health information and counselling services for young people, with a special focus on the prevention of HIV/AIDS and STIs. This output will be achieved by: (a) assisting the Ministry of Health in training teachers and school counsellors for in-school information and counselling activities; (b) developing an intersectoral referral system that includes youth-friendly centres; (c) expanding youth peer-educator networks; and (d) sensitizing community and religious leaders on the reproductive health needs of youth. Strategies for targeting vulnerable groups and increasing young people's accessibility to counselling and information on sexual and reproductive health include expanding partnerships with non-governmental organizations (NGOs), including youth organizations and promoting policy dialogue.

Population and development component

18. The outcome of this component is: national and sectoral policies take into account gender and population, in the context of development and emergencies. This outcome will be achieved through two outputs.

19. Output 1: To have increased the national capacity to integrate population, gender and reproductive health into development and emergency planning processes. This output will improve government capacity to introduce policies and sectoral plans that address gender and population issues in development and emergency planning. UNFPA will assist the Ministry of Planning, the Palestinian Central Bureau of Statistics, the Ministry of Health and other ministries in achieving this output. UNFPA will also assist universities in strengthening their teaching faculty in demographic analysis and population research. The programme will also undertake policy dialogue and advocacy activities to ensure that population and gender concerns are mainstreamed into the planning process.

20. Output 2: To have enhanced the national capacity to generate and utilize disaggregated data. The programme will build national capacity in data systems so that they include more gender and reproductive health information. It will support collection and registration procedures at the national level through training and in-depth assessments of statistical systems. Monitoring mechanisms will be improved to make data available for planning purposes. Although the programme will concentrate activities in the Palestinian Central Bureau of Statistics, NGOs will also be encouraged to undertake research and monitoring activities. The programme will provide the 2007 census with updated population information that may be used as baseline data. The programme will encourage networking among partners and dialogue between data users and producers.

Gender component

21. The outcome of this component is: institutional mechanisms for improving the legal status of women, eliminating gender-based violence, promoting women's and girls' rights, and increasing gender equity in decision-making, including political and economic decision-making. This outcome will be achieved through the following two outputs.

22. Output 1: To have enhanced the capacities of the Government and civil society organizations to empower women in community-building in six localities. The lack of women's access to opportunities, whether educational, political or economic, increases their vulnerability to poverty. This output therefore seeks to improve institutional capacity, particularly at the governmental level, to create a linkage between grass-roots organizations and formal structures that target women, especially poor women. Networking

with NGOs at the community level and strengthening bridges with local authorities are key strategies for this output.

23. Output 2: To have built the technical and organizational capacities of the Ministry of Women's Affairs and civil society organizations to institutionalize gender principles and human rights. This output will focus on institutionalizing gender issues through focal points in selected ministries and combating gender-based violence through work with civil society organizations. Networking and coalition-building, particularly around the issue of gender-based violence, will be strategies to achieve this output.

24. The Government will implement the proposed programme in collaboration with NGOs and civil society organizations. The key implementing agencies are the Ministry of Health, the Ministry of Women's Affairs, the Ministry of Youth and Sports, the Ministry of Education, the Ministry of Planning, the Ministry of the Interior and the Palestinian Central Bureau of Statistics. NGOs and civil society organizations will play instrumental roles in targeting the most vulnerable groups and in carrying out advocacy and coalition-building activities.

IV. Programme management, monitoring and evaluation

25. The programme will be implemented in coordination with other United Nations organizations, including UNICEF, UNDP, the World Health Organization (WHO) and the United Nations Office for the Coordination of Humanitarian Affairs. The UNFPA office will help to elaborate the CCA and the UNDAF, and will promote coordination mechanisms to ensure synergy between United Nations programmes.

26. Government institutions and NGOs will jointly implement the programme. The Government will provide in-kind contributions, including salaries. Additional resources will be mobilized from donors through the consolidated appeals process and other means. Joint reviews and joint monitoring of activities will be undertaken. Baseline data will be established at the inception of the programme and integrated into the component projects.

27. The UNFPA office in the Occupied Palestinian Territory consists of a representative, an assistant representative and administrative support staff. Strengthening the Gaza office during this cycle is a prerequisite to responding effectively to the emerging needs of the population in the Gaza Strip.

28. Programme funds will be earmarked for two national programme posts and one administrative support post, within the framework of the approved country office typology. National project personnel and short-term consultants may also be recruited to strengthen project implementation. The UNFPA Country Technical Services Team in Amman, Jordan, will provide technical backstopping.

RESULTS AND RESOURCES FRAMEWORK FOR THE OCCUPIED PALESTINIAN TERRITORY

National priority: to address poverty in a sustainable way, to reduce unemployment and to build social capital and functioning state institutions

Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Reproductive health	Outcome: Increased utilization of comprehensive, high-quality reproductive health services Outcome indicators: • Contraceptive prevalence rate increases from 47% to 55% • Women with at least three antenatal visits during pregnancy at 70% • Post-natal care reaches 40% • Proportion of service delivery points with minimal service package that includes reproductive health and which correctly use reproductive health and referral protocols and guidelines	Output 1: Improved accessibility to integrated, comprehensive, high-quality reproductive health services in 20 service delivery points in villages with restricted mobility; 39 Ministry of Health primary health- care service delivery points, three women's centres, and six hospitals Output indicators: • 100% of selected service delivery points offering at least three reproductive health services complying with protocols and guidelines • Proportion of women having obstetric complications correctly identified or referred Output 2: Increased accessibility of reproductive and sexual health information and counselling services for young people, with a special focus on the prevention of HIV/AIDS and STIs Outcome indicators: • Proportion of youth that recognize three methods of HIV/AIDS transmission and prevention, at least one of which is condom use • Proportion of youth that recognize at least three STIs • Proportion of students in grades 9-12 in selected schools who reflect positive attitudes on gender equity, equality and empowerment	• Ministry of Health primary health-care service delivery points; Women's Health and Development Directorate; Women's Health Education Directorate; three women's centres (Jabalia, El- Bureij and Hebron); NGOs; Palestinian Central Bureau of Statistics; Palestinian Medical Relief Society; Palestinian Family Planning and Protection Association UNICEF; WHO; USAID • Ministry of Education; Ministry of Health; Ministry of Social Affairs; Ministry of Youth and Sports • NGOs and civil society • UNICEF	$5 million ($3.2 million from regular resources and $1.8 million from other resources)
Population and development	Outcome: National and sectoral policies have taken into account gender and population, in the context of development and emergencies Outcome indicators: • Common understanding of operational linkages between population, reproductive health, gender and poverty reduction • National population and development policy document based on the International Conference on Population and Development (ICPD) and the Millennium Development Goals (MDGs) adopted • Increased budgetary resources for national population policies and programmes from donors and the Palestinian Authority	Output 1: To have increased the national capacity to integrate population, gender and reproductive health into development and emergency planning processes Output indicators: • National mechanisms to elaborate and monitor population policy functioning • Draft population policy document elaborated in line with the ICPD and MDGs • At least two supportive networks for gender, population and development (journalists and parliamentarians) established • Gender strategy developed and implemented in five line ministries	• Ministry of Planning; Ministry of Women's Affairs; Ministry of Social Affairs; Palestinian Central Bureau of Statistics; parliament; local authorities • Women's, youth and development NGOs; other NGOs; community leadership groups; journalists • UNDP	$1.3 million ($0.8 million from regular resources and $0.5 million from other resources)

Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Population and development (cont'd)		Output 2: To have enhanced the national capacity to generate and utilize disaggregated data Output indicators: • Advocacy fund-raising plan for the 2007 census operationalized • International standards-based framework of national data systems operationalized • Set of indicators for the follow-up of the MDGs and ICPD, including gender equity and equality, the empowerment of women and human rights indicators institutionalized • Increased utilization of census and other population data	• Palestinian Central Bureau of Statistics; statistical units in ministries; health information unit of the Ministry of Planning • UNDP; United Nations Development Fund for Women (UNIFEM); WHO	See above
Gender	Outcome: Institutional mechanisms for improving the legal status of women, eliminating gender-based violence, promoting women's and girls' rights, and increasing gender equity in decision-making, including political and economic decision-making Outcome indicators: • Numbers of laws and directives revised to remove discriminatory articles against women • Comprehensive national policy and strategy on gender-based violence prevention drafted and advocated for adoption	Output 1: To have enhanced the capacities of the Government and civil society organizations to empower women in community-building in six localities Output indicators: • Functional mechanism to follow-up on women's accessibility to poverty-alleviation schemes in place • [illegible] workplans addressing gender equity and equality and the [illegible] of women components in six localities [illegible]-based centres offering skills to young women to access [illegible] ing [illegible] ve built the technical and organizational capacities of the Ministry of [illegible] fairs and civil society organizations to institutionalize gender principles [illegible] an rights Output indicators: • Functioning coordination of gender focal points in concerned line ministries and institutions • Functioning observatory mechanism to monitor gender equity and equality and empowerment of women established • Results-based plan of action and campaign elaborated with coalition combating violence against women • Number of community organizations and leaders endorsing the plan of action and campaign	• Ministry of Women's Affairs • NGOs and community-based women's centres; •UNIFEM; •Women's coalition groups to combat violence against women.	$1 million ($0.5 million from regular resources and $0.5 million from other resources) Total for programme coordination and assistance: $0.5 million from regular resources